

## HEAD AND NECK.

I. **Transplantation of Rabbit's Conjunctiva to the Human Eye.** By J. R. WOLFE, M.D., (Glasgow). The author briefly discusses the operation of transplanting the conjunctiva of the rabbit to the human orbit in cases of symblepharon from traumatic causes. He operates as follows: (1) He first separates the adhesions by means of blunt-pointed scissors, so that the eyeball can move in every direction. The conjunctival sac and cornea are cleared of nodules. (2) Two rabbits are then put under chloroform, one being kept in reserve in case of accident. (3) He takes from the rabbit that portion of the conjunctiva which lines the inner angle, covering the "membrana nic-tans," and extending as far as the cornea on account of its vascular-ity and looseness. If the palpebral opening is too narrow, he enlarges it at the external angle and introduces a ligature through the whole thickness of the free border of the lower lid, and by means of this ligature the lid is drawn open and kept steady and the conjunctival cul-de-sac exposed. (4) Into the middle of the flap to be removed, a black silk ligature is introduced, a knot is tied and the ligature cut short. The knot is intended to mark the epithelial surface of the membrane, for without it the flap is apt to curl up and leave us at a loss how to adjust it. (5) Next he makes the boundary of the conjunctiva of the rabbit which he wishes to transplant by inserting four black silk sutures, which he secures with a knot. The ligatures having been put on the stretch, he separates the conjunctiva to be removed with scissors, and by means of a fine spatula spreads it upon the back of his left hand. The four ligatures are then cut off and the conjunc-tiva trimmed to the requisite size. It should be larger than the lost substance. (6) He now returns to the patient and sees that the bleed-ing has subsided and that the parts are in a fit condition to receive the transplanted flap, which has, in the meantime, become very like a piece of parchment, and adherent to the dorsum of the hand. (7) It . is then lifted by means of a spatula and transferred to replace the lost conjunctiva of the patient. It is secured in its place by six or eight sutures, or even more if necessary. This is a very difficult process, re-

quiring delicate manipulation, and the assistant must keep the flap in its place by a spatula while it is being stitched in its new place. Both eyelids are closed with lint and a bandage and kept so for four days. The sutures are left in for six or eight days.

Owing to the tediousness of the operation it is impracticable to use chloroform, and this is generally dispensed with in cases of adults. Young subjects are anaesthetized during the first stages and kept under control thereafter by moral suasion. A number of cases are quoted.  
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**II. Total Resection of the Bones of the Face.** By DR. PÉAN (Paris). The case is one of extreme interest, as it is one of multiple, recurrent osteofibromata occurring in a young woman, æt. 23 years, and due to dental heterotopia.

The following bones were removed for the cure of the disease: Up per and lower maxilla, part of the sphenoid and both malars.

The origin of the disease dates back nine years; in 1884 the right maxilla was removed for this disease, *i. e.*, osteofibroma, but there was a recurrence followed by the spread of the trouble into the same bone of the left side of face. The woman was first seen by Péan in November, 1888. At that time, both superior maxillæ much enlarged, specially the left, which was about the size of the head of a new born child. The lower jaw was much swollen and enlarged. The eyes and nose were much sunken in, and the orbital, nasal and buccal cavities were almost completely closed. The gums were much thickened, and the teeth loosened and deviated, though nothing in their arrangement led to suppose two of them to be ectopic. Mastication, deglutition, phonation and vision were much interfered with.

In order to remove the whole of the trouble, it was necessary to remove the three maxillæ, the malars and part of the sphenoid.

On December 14, 1888, Péan proceeded to remove the tumor from the upper part of the face, that is, resecting both maxillæ, and the pterygoid processes of the sphenoid; here on following up the tumor he found a small molar tooth lodged in the spongy tissue of the body